



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 124005
Applicant(s): Timothy J. Hollis			
Serial No. 10/064,619	Filing Date July 31, 2002	Examiner I. Arana	Group Art Unit 2859
Invention: NON-COUPLING MAGNETIC SHIELDING COIL			
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I hereby certify that this <u>Response to Office Action (13) pages and Amendment Transmittal (1) page</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9306</u>) on <u>April 19, 2004</u> (Date)			
<div style="text-align: center;">Lisa Snyder (Typed or Printed Name of Person Signing Certificate)  (Signature)</div>			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 124005			
Applicant(s): Timothy J. Hollis							
Serial No. 10/064,619	Filing Date July 31, 2002	Examiner L. Arana	Group Art Unit 2859				
Invention: NON-COUPLING MAGNETIC SHIELDING COIL							
<u>TO THE COMMISSIONER FOR PATENTS:</u>							
Transmitted herewith is an amendment in the above-identified application.							
The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE		
TOTAL CLAIMS	12 -	20 =	0 x	\$18.00	\$0.00		
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00		
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00		
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00		
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-0845 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.							
 _____ Signature			Dated: April 19, 2004				
Troy J. LaMontagne Registration No. 47,239 CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Facsimile (860) 286-0115 Customer No. 23413			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</td> </tr> <tr> <td style="height: 40px; vertical-align: bottom; text-align: center;"> Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence </td> </tr> </table>			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence
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Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence							
CC:							

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: TIMOTHY J. HOLLIS)
Serial No.: 10/064,619) Group Art Unit: 2859
Filed: July 31, 2002)
For: NON-COUPLING MAGNETIC) Examiner: Arana, Louis M.
SHIELDING COIL) Confirmation No.: 8843

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

OFFICIAL**AMENDMENT - RESPONSE TO OFFICE ACTION**

This submittal is a response to the Office Action mailed February 17, 2004.
Allowance of all claims is respectfully requested in view of the following remarks.